24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Liberty Action PAC	C C00508598
Check If X 24-hour report 48-hour report New report X Amends report filed or	n 12 / 06 / 2012
Full Name (Last, First, Middle Initial) of Payee Grassroots Action, Inc	Date
Mailing Address 90 Main Street	11 01 2012 Amount
City State Zip Code	
Maxwell IA 50161	1375.51 ansaction ID : SE.4159
Purpose of Expenditure e-mail delivery Category/ Type Office S	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Y President
BARACK OBAMA Check	
Calendar Year-To-Date Per Election for Office Sought 70077.43	sement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Liberty Counsel	Date 11 01 7 2012
Mailing Address P.O. Box 540774	11 01 2012
	Amount
City State Zip Code Orlando FL 32854	5400.23
	Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 75477.66 Disburs 2012	sement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	6775.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Deryl Madison Edwards [Electronically Filed] Date Signature	/ 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y